



PTO/SB/21 (09-04)

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**TRANSMITTAL  
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

9

Application Number

10/092,357

Filing Date

March 5, 2002

First Named Inventor

Irving BOIME

Art Unit

1646

Examiner Name

J. Andres

Attorney Docket Number

295002006700

**ENCLOSURES (Check all that apply)**☒Fee Transmittal Form (1 page +  
duplicate for fee processing)☐

Fee Attached

☒

Amendment/Reply (5 pages)

☐

After Final

☐

Affidavits/declaration(s)

☒

Extension of Time Request (1 page)

☐

Express Abandonment Request

☐

Information Disclosure Statement

☐Certified Copy of Priority  
Document(s)☐Reply to Missing Parts/  
Incomplete Application☐Reply to Missing Parts under  
37 CFR 1.52 or 1.53☐

Drawing(s)

☐

Licensing-related Papers

☐

Petition

☐Petition to Convert to a  
Provisional Application☐Power of Attorney, Revocation  
Change of Correspondence Address☐

Terminal Disclaimer

☐

Request for Refund

☐

CD, Number of CD(s) \_\_\_\_\_

☐

Landscape Table on CD

☐After Allowance Communication  
to TC☐Appeal Communication to Board of  
Appeals and Interferences☐Appeal Communication to TC  
(Appeal Notice, Brief, Reply Brief)☐

Proprietary Information

☐

Status Letter

☒Other Enclosure(s) (please  
Identify below):

Return Receipt Postcard

Remarks

**Customer No. 25225****SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm Name

MORRISON &amp; FOERSTER LLP

Signature

Printed name

Kate H. Murashige

Date

April 22, 2005

Reg. No.

29,959

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to: MS Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: April 22, 2005

Signature:

(Marian L. Christopher)



Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

Effective on 12/08/2004.  
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

# FEE TRANSMITTAL

## For FY 2005

☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 60.00

### Complete if Known

Application Number	10/092,357
Filing Date	March 5, 2002
First Named Inventor	Irving BOIME
Examiner Name	J. Andres
Art Unit	1646
Attorney Docket No.	295002006700

### METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_  
☒ Deposit Account Deposit Account Number: 03-1952 Deposit Account Name: Morrison & Foerster LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee  
☒ Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

### FEE CALCULATION

#### 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	0.00
Design	200	100	100	50	130	65	0.00
Plant	200	100	300	150	160	80	0.00
Reissue	300	150	500	250	600	300	0.00
Provisional	200	100	0	0	0	0	0.00

#### 2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

Total Claims      Extra Claims      Fee (\$)      Fee Paid (\$)  
- =      x      =      0.00

Multiple Dependent Claims  
Fee (\$)      Fee Paid (\$)  
0.00

Indep. Claims      Extra Claims      Fee (\$)      Fee Paid (\$)  
- =      x      =      0.00

#### 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets      Extra Sheets      Number of each additional 50 or fraction thereof      Fee (\$)      Fee Paid (\$)  
- 100 =      /50      (round up to a whole number) x      =      0.00

#### 4. OTHER FEE(S)

	Fees Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)	0.00
Other (e.g., late filing surcharge): 2251 Extension for response within first month	60.00

#### SUBMITTED BY

Signature	Kate H. Murashige	Registration No. (Attorney/Agent)	29,959	Telephone	(858) 720-5112
Name (Print/Type)	Kate H. Murashige	Date	April 22, 2005		